

Abandonment of Well Form

When abandoning a well, this form must be filled out and submitted back to the Health Department.

Address				_ Needham, MA 0249	
Owner	Address		Tel.No.		
Well Driller	Address		Tel.No.		
Type of Well: Drive	n Drilled	Bored	_ Dug	Jetted	
The Health Department re	quires the following documen	nts:			
Signed confirmation	n of the procedures used to ab	andon the well.			
	by checking off the required ne signature of the well driller				
Cap/plug the pipe to	o the former well				
Fill with concrete u	p to the top of the well				
	documentation that the wel building permits, or delay			the owner to fines, prevent	
Well Driller'sSignature		State License N	No Dat	e	
PrintName					
Name of Company					
Address			Phone		